

is cancer." That sort of thing is not only gross exaggeration, but it is well calculated to produce an immense amount of harm. It is highly improbable that the supreme court will be called upon to again pass upon any phase of the medical law. While it is true that this particular portion of the law was not considered in the now celebrated case, *ex-parte Gerino*, still the general provisions of the act were so fully passed upon in that decision that the matter is practically a closed incident. The board is to be congratulated upon its action and upon the result of its labors. There are other holders of certificates who should be dealt with, and it is to be hoped that members knowing of such cases will file charges before the board. The board cannot originate complaints, but it will be very glad to receive them.

Niels R. Finsen died in Copenhagen, Denmark, on September 24th. For fifteen years he had worked carefully, scientifically and conscientiously, in the field of phototherapy, and his results have been brilliant. Seldom, in the practical application of medicine, do we see the methods of exact scientific research brought into active play; yet accuracy of just this sort characterized all of Finsen's work, and his reports are almost above criticism. In 1903 he was voted the Nobel prize, and turned the money over to the Finsen Institute. His personal, as well as his professional life is reported to have been such as to serve as a practical lesson in honesty and uprightness in scientific work as in every-day life.

We are advised by the Pacific Mutual Life Insurance Company that Diddle was never appointed an examiner for that company, and that he has made but six examinations altogether for it. These were accepted for the reason that it did not know he was an unlicensed physician, and for the further reason that there was no other physician in the community. Excellent recommendations are filed with the company, commending Diddle highly, and it probably did not occur to anyone to see whether he had a license. We would respectfully urge upon all life insurance companies the necessity for doing something more than merely getting a couple of references; they should make sure that the applicant is licensed. Through an unfortunate phraseology of the editorial in question, the inference might be drawn that this company paid less than the regular \$5.00 fee for examinations. This is not the case. The medical director of the company, an ex-president of the State Society, no less a person than the State Society's good friend Dr. Cluness, has for years been on record as highly approving the minimum fee of \$5.00 for all examinations.

Last month the JOURNAL referred to the case against one "Dr." Perhaps, in Tuolumne county.

ANOTHER CONVICTION. We are very glad to be able to report that on the 13th of October Perhaps came into court and asked to change his plea from "not guilty" to "guilty." This the court allowed, and the defendant then asked that he be sentenced immediately. In accord with his request, the minimum fine of \$100.00 was assessed, which he paid at once. Dr. W. H. Roberts did excellent work in securing the evidence for this conviction and in pushing it to the end. He is to be congratulated.

Elsewhere in the JOURNAL is a letter asking information as to the attitude which the physician should assume toward the non-med-

THE LAY TREATER. ical person who uses X-ray or electrical apparatus in the treatment of patients for doctors. The JOURNAL has also received a circular signed by a Mrs. H. M. Ames, Jr., San Francisco, setting forth the fact that she is prepared to treat patients by the Finsen light apparatus, and offering to pay to physicians a commission of \$1.00 per treatment for each patient referred to her. The opinion of practically all reputable physicians is that such conduct, among physicians particularly, is decidedly reprehensible. The physician should charge the patient what he thinks right and proper, but should not be a party to a scheme for getting more money out of him by the "commission" process. The question is a new one, and should receive the attention and discussion of the medical profession.

Oakland is in grave danger of obtaining decidedly undesirable distinction, not to say notoriety, as an anachronous community.

OAKLAND AND VACCINATION. For the opening years of the twentieth century to see enacted or permitted an upsetting of the wise rule of compulsory vaccination of school children is, to put it very mildly, peculiar. It would be a waste of good paper and ink to point out the value of regular and compulsory vaccination requirements. The physicians of Alameda county, and of Oakland especially, should ponder upon the possible result of allowing the anti-vaccination craze to live and grow. Less somnolent parts of the state will certainly object to unchecked travel, in the event that smallpox appears in Oakland, and that beautiful city will then find itself—quarantined. This would be both awkward and unpleasant, and the only consolation that could be offered would be to send them some of the "hints" fathered by the San Francisco Board of Health for the benefit of "the families of infectious, contagious and communicable diseases." Wake up!